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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/058,970	01/28/2002	Thomas J. Perkowski	100-058USANB0	4672	
Thomas J. Perkowski, Esq., P.C. Soundview Plaza			EXAM	EXAMINER	
			FADOK, MARK A		
1266 East Main Street Stamford, CT 06902			ART UNIT	PAPER NUMBER	
Stannord, C1	10702		3625		
			MAIL DATE	DELIVERY MODE	
			12/31/2007	PAPER	

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

<u></u>	Application No.	Applicant(s)	
Interview Summary	10/058,970	PERKOWSKI, T	HOMAS J.
merview Summary	Examiner	Art Unit	
	Mark Fadok	3625	
All participants (applicant, applicant's representative, PTO	personnel):		
(1) Mark Fadok.	(3)		
(2) Mr. Perkowski.	(4)		
Date of Interview: 20 December 2007.			
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)⊠ applicant 2	2) applicant's representative	e]	
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊠ No.		•
Claim(s) discussed: <u>lo4</u> .			
Identification of prior art discussed:			
Agreement with respect to the claims f)⊠ was reached. g)□ was not reached. h)□ N	I/A.	
Substance of Interview including description of the general reached, or any other comments: <u>Mr. Perkowski will be conamendment that will be sent in after the first of the year. The specification</u> .	recting the dependency proble	em in claim 104 i	n a 312
(A fuller description, if necessary, and a copy of the amend allowable, if available, must be attached. Also, where no callowable is available, a summary thereof must be attached	opy of the amendments that w	reed would render the	er the claims claims
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW ON reverse side or on attached sheet.	last Office action has already OF ONE MONTH OR THIRTY ERVIEW SUMMARY FORM,	been filed, APP OAYS FROM T WHICHEVER IS	LICANT IS THIS LATER, TO
	MARK FA	DOK (AMINER	
	0	<i></i>	
Examiner Note: You must sign this form unless it is an	wa p		
Attachment to a signed Office action.	Examiner's sign	ature, if required	

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